## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571) 273-2885

INSTRUCTIONS. This form should be used for transmiring the INSTRUCTION FIRST BURNEY (Frequency). Blocks I through 5 should be completed where propriets All, Burney completes of the propriets and interfer correspondance including the Patent Sentence of maintenance for an will be mainted to reserve correspondance address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance for nonfloations.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

TOWNSEND AND TOWNSEND AND CREW LLP/015114

TWO EMBARCADERO CENTER 8TH FLOOR

SAN FRANCISCO, CA 94111-3834

Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Sally Zumba	(Depositor's name)
(30)	(Signature)
November 27, 2007	(Date)

				Sally Zumba		(Depositor's name)
				(30	<b>-</b>	(Signature)
				November 27, 200	7	(Date)
APPLICATION NO.	FILING DATE	Ι	FIRST NAMED II	NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/644,223	08/19/2003		Peter B	AIN	015114-065200	US 6465
TITLE OF INVENTION:						
FAST PARALL	EL CALCULATION	OF CYCLIC	REDUNDAN	CY CHECKS		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440.00		\$0	\$1440.00	12/06/2007
EXAM	MINER	ART UNIT		CLASS-SUBCLASS	1	
BAKER, STEPH	EN M.	2112		714-781000	•	
Change of correspondence address or indication of "Fee Address" (37 CRI 1363).   Change of correspondence address or indication of a control of the contro						
Please check the appropriate assignee category or categories (will not be 4a. The following fec(s) are enclosed:  Issue Fee Publication Fee (No small entity discount permitted)		4l	b. Payment of Fe  A check in Payment by	e(s): the amount of the fee(s) is en credit card. Form PTO-203	8 is attached.	<u> </u>
Advance Order - # of Copies		The Directed Deposit Account	or is hereby authorized by on at Number 20-143	charge the required fee(s), or (enclose an extra	credit any overpayment, to copy of this form).	
a. Applicant claims S	(from status indicated above MALL ENTITY status. See is requested to apply the Issi vublication Fee (if required) to ords of the United States Pat	37 CFR 1.27.			LL ENTITY status. See 37 ( y paid issue fee to the applica istered attorney or agent; or	
Authorized Signature	N /1 /	luhi			mber 27, 2007	

Authorized Signature Name Including	Date November 27, 2007
Typed or printed name David B. Raczkowski	Registration No. 52,145
This collection of information is required by 37 CFR 1.311. The information is required to a application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This colk ubmitting the completed application form to the USPTO. Time will vary depending up.	ection is estimated to take 12 minutes to complete, including gathering, preparing, an

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Pattern and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandra, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandra, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.